# 11800053436

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### **COVER LETTER**

TO: Registration Se Division of Cor	ection porations			
JoTi, LLC				
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jairo Patino			
		Name of Person		
	JOTI. LLC		9v.4 c 24	~~~ <b>1</b>
		Firm/Company		ة 1 معيد را المعيد برا
	302 Woodland Drive		211	; ;;;;
		Address		O
	Eustis , Florida 32726		0.0 0.0	
	info@yohohome.com	City/State and Zip Code		
	E-mail address: (	to be used for future annual report notific	ration)	
For further information c	oncerning this matter, please c	all:		
Jairo Patino		386 490-2337		
Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOTI, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)	
he Articles of Organization for this Limited Liability Company	were filed on February 28, 2018	and assigned
orida document number 1.18000053436		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
		<i>5</i>
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.G."
inter new principal offices address, if applicable:	302 Woodland Drive	
Principal office address MUST BE A STREET ADDRESS)	Eustis, FL 32726	
		J
		0
inter new mailing address, if applicable:		<u>.</u>
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her	_	nter the name of the
egistered agent and/or the new registered office audress ner	<u>e</u> :	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florid	to
	City	Zip Code

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

#### MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	<u>Address</u>	Type of Action
MCD	TERESA RAMSEY	1113 S. MYRTLE AVE	
MGR			
		SANFORD	
			■ Remove
		FLORIDA 32771	
			☐ Change
			•
			Change
			C Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be	prior to da			after filing.) Pu	
<b>Solution</b> If the date inserted in this block does not meet the approximent's effective date on the Department of State's recomments.		statutory filinį	g requirements.	this date will	not be liste
e record specifies a delayed effective date, but The 90th day after the record is filed.	it not an	effective t	me, at 12:0	1 a.m. on	the earlie
oated OCTOBER 21 2018					
Cinto Vitual					
Signature of a member or					

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee